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1	UNITED STATES DISTRICT COURT EASTERN DISTRICT OF MICHIGAN SOUTHERN DIVISION		
3	UNITED STATES OF AMERICA,		
4	Plaintiff,		
5	v No. 17-mj-30182		
6			
7	JUMANA NAGARWALA,		
8	Defendant. /		
9			
10	DETENTION HEARING		
11	BEFORE THE HONORABLE MONA K. MAJZOUB UNITED STATES MAGISTRATE JUDGE		
12	Theodore Levin United States Courthouse 231 West Lafayette Boulevard		
13	Detroit, Michigan Monday, April 17, 2017		
14	APPEARANCES:		
15			
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24			
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                  Detroit, Michigan
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                 Monday, April 17, 2017 - 1:45 p.m.
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                  THE CASE MANAGER: The Court calls Case Number
     17-30182, the United States of America versus Jumana Nagarwala.
 4
 5
                 MS. WOODWARD: Good afternoon, your Honor. Sara
 6
     Woodward on behalf of the United States.
 7
                 THE COURT: Good afternoon.
 8
                 MS. SMITH: Good afternoon, judge. My name is
 9
     Shannon Smith on behalf of Jumana Nagarwala who stands to my
10
     right.
11
                  THE COURT: Thank you.
12
                  Will the defendant please state her name to the
13
     Court.
14
                                   Jumana Nagarwala.
                  THE DEFENDANT:
15
                  THE COURT: Ms. Nagarwala, you are here this
16
     afternoon for purposes of a detention hearing.
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                 Are the parties prepared to proceed?
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                 MS. WOODWARD: Yes, your Honor.
19
                 MS. SMITH: Yes, your Honor.
20
                  THE COURT: Ms. Woodward.
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                 MS. WOODWARD: Yes. Can we approach sidebar for
22
     just a moment?
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             (Whereupon sidebar discussion held)
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                 MS. WOODWARD: Thank you.
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                  THE COURT: You're welcome.
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                 MS. WOODWARD: All right. Thank you, judge.
                                                               I'm
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     ready to proceed.
                  THE COURT: Please do.
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                 MS. WOODWARD: Your Honor, in this case the
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     defendant is charged with 18 U.S.C. Section 116, which is
 6
     Female Genital Mutilation; 18 U.S.C. Section 2423 (a) and (e),
 7
     which is Transportation with intent to engage in criminal
 8
     Sexual Activity, including conspiracy, and also with 18 U.S.C.
 9
     Section 1001, which is making a false statement to a federal
     officer.
10
                  If the Court finds that there is probable cause to
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12
     believe that this defendant has violated 18 U.S.C. 2423, then
13
     this is a rebuttable presumption case and there is a
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     presumption in favor of detention.
15
                  The government is seeking detention of this
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     defendant because she is both a risk of danger to the community
17
     and also a risk of nonappearance, and today I'm going to
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     proffer the complaint, the pretrial services report and
19
     recommendation, as well as some additional facts.
20
                 Before I begin with the facts, I did want to note
21
     that the pretrial services report and recommendation is that
22
     the defendant be detained as both a risk of flight and a danger
23
     to the community.
                  So, let me give the Court a little bit of
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25
     background. The defendant is a member of a religious and
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cultural community in the metropolitan Detroit area. It is a community that is also worldwide and it's a community that has historically practiced female genital mutilation on girls at approximately age seven.

The FGM, or female genital mutilation in this community involves the removal of the clitoris or clitoral hood from young girls. It is a secretive practice and the young girls are not told about the procedure before it takes place, and after the procedure they are told not to speak about it with anyone.

Although it is a historical practice, today it is even more secretive because this particular community is aware that the practice is illegal. And they are aware specifically that 18 U.S.C. Section 116 criminalizes this practice.

And, your Honor, I only have one exhibit today.

I'm going to hand you what's been marked as Government's

Exhibit 1. I have provided a copy to defense counsel.

And this is a statement, public statement released by the community in Detroit specifically stating that this historical practice is prohibited by Section 116. And the statement directs the community not to engage in this practice and the statement was dated May 16th -- I'm sorry. May 11, 2016.

Despite this statement on the community not to practice FGM, the FBI did receive information that FGM was

still practiced in the community and specifically that the defendant was cutting the genitals of young girls and that she had been performing this procedure in the Detroit area for quite some time. Perhaps from 2005 to present.

The facts outlined in the criminal complaint

discuss the evidence that the defendant performed this procedure on two girls from Minnesota and specifically that the FBI received call detail records, or phone records for the defendant's cell phone showing that she had contact with the phone number in Minnesota in January of this year.

Specifically, that there was a phone call on January 21st with this Minnesota number between the defendant and the Minnesota number, six text messages on January 23rd, and nine text messages on January 24th.

The FBI determined that that phone number was assigned to a family in Minnesota with a seven-year-old daughter and that girl was identified in the criminal complaint as Minnesota Victim One.

The call detail records from the Minnesota telephone show that that phone traveled from Minnesota to Michigan on February 3rd of 2017. And after the FBI identified this activity from the phone records, the FBI reviewed surveillance video depicting the parking lot of a particular medical clinic in Livonia.

The FBI had information that this clinic was used,

that the defendant used this clinic to perform the FGM procedures, and the surveillance video shows adults arriving at the clinic, including the defendant, going into the clinic on a Friday evening after business hours when the clinic was closed and that after the defendant and others arrived at the clinic, another vehicle arrived and a woman and a young child went into the clinic. After a period of time that child came out and it's believed that a second child, that you can see on the video, then went into the clinic.

The phone records also showed that the Minnesota phone number used a tower that served a particular, hotels in Farmington, Michigan and hotel records were obtained from the hotel showing that a parent of one of the Minnesota victims rented two hotel rooms from February 3rd to February 4th and surveillance video from the hotel in fact shows two adult women and two minor girls coming into the hotel.

On Saturday, February 4th, the Minnesota telephone, according to the phone records, returned directly to Minnesota.

Based on this, the FBI identified two young girls, both currently seven years old, that live in Minnesota, and on Monday of last week both girls were interviewed by child forensic interviewers with the FBI. And both girls disclosed that they came to Detroit together and went to see a doctor at a medical clinic.

The first victim said that she went to the doctor to get the germs out. She identified the defendant from an unmarked photograph. She said she had to take off her pants and underwear, laid on an examining table, and that the defendant pinched her on her genitals and that it hurt and that she was given a pad to wear in her underwear because she was bleeding. And she said that the next day it hurt a lot and that she was told not to talk about the procedure.

This child was examined by a doctor pursuant to a search warrant and the doctor concluded that there was medical evidence that FGM had been performed on this child and that her genitals were not normal in appearance.

The second seven-year-old girl was also interviewed by a child forensic interviewer and she also identified the defendant as the doctor she saw in Detroit. She said that the defendant took off her pants and underwear, put her on the table, that she got what she called a shot in her upper right thigh. She drew a picture of the examining room and put an X on the table for where she said there was blood on the table and she also said that she was told the procedure is a secret and that she's not suppose to talk about it.

She said that after the procedure she could barely walk from the pain and that the defendant told her that she was fine. And she said that she left one of her winter gloves at the clinic.

This child was also examined by a child abuse pediatrician and the doctor also saw that there was some evidence of a healing injury or scar on her clitoral hood.

One of the parents of one of these girls in Minnesota was interviewed by the police and child protective services and this parent confirmed that the parent took their child to Detroit to see a doctor for a cleansing, and then while in the presence of the authorities this parent made a phone call to the defendant and she said that the police had contacted her and asked the defendant what she should say and that defendant told this parent to deny everything and to give an excuse for why she came to Detroit.

On the same day that the two children in Minnesota were interviewed by child protective services and by the FBI, a number of children in Michigan were also interviewed. Some of these children also disclosed that the defendant had performed procedures on their genitals. Specifically, one child said that the defendant had performed a medical procedure to remove her bump from her precious package with a long curved tool with a split end.

Another child also described having a bump removed and said she screamed in pain and was told to be quiet.

And another child said that the defendant performed a procedure on her and it was part of her body where she goes to the bathroom and that after the procedure she was

hurting and crying.

The dates that these procedures would have occurred on the Michigan victims range for years. The conduct of the defendant spans years and the two children from Minnesota, while we have the most concrete evidence about the procedures the defendant performed on those children, there is nothing to suggest that this is the first time the defendant did this procedure. In fact, it would have been that she had done this, the evidence suggestions she had done this to many other children as well.

Other children were interviewed on that same day, on Monday, April 10th, and some of those children made no statements about FGM procedures or about the defendant.

Some parents in Michigan were also interviewed and some parents admitted that the defendant had performed procedures on their daughter genitals, daughter's genitals while others denied knowledge of the procedure or said that it did not happen.

On that same day, Monday of last week, the defendant was interviewed by child protective services and by law enforcement and the defendant stated that she was aware that FGM was illegal. She said she had no knowledge of FGM being performed by anyone in her community; said she had never performed FGM on any minor children, and that she was not involved in any FGM procedures.

That evening, on the evening of April 10th, the medical clinic in Livonia was also searched by the authorities and a member, the doctor who runs that clinic was interviewed by the FBI, and he said that he knows the defendant. He admitted that she does see patients at his clinic. He said that the patients that she sees are girls within their community between ages of six and nine; that she does not bill or otherwise charge for the procedure and that she does treat the children for problems with their genitals but said that that problem was rashes. And he said that she sees them at his clinic when it is closed on Friday evenings or Saturdays and that she had seen children in this manner at his clinic after hours without creating any billing and specifically children within the community approximately five to six times per year and that on some occasions she saw multiple children.

That evening the defendant's home was also searched by the FBI and she declined to make any statements. But despite everything that happened on Monday, the forensic interviews of numerous children within the defendant's community in Michigan and in Minnesota, her interview with CPS and law enforcement, the search of her home, and the search of the medical clinic in Livonia, two days later, on Wednesday, April 12th, the defendant was arrested at the Detroit Metropolitan Airport where she was boarding an international flight with a final destination of Nairobi, Kenya.

And the government concedes that this is a trip she had planned before the events of Monday, April 10th, but that despite everything that had happened on Monday, that she was still planning to leave the country.

On Wednesday, the day that the defendant was arrested, the FBI also seized the defendant's cell phone and her phone was searched pursuant to a search warrant and in fact she provided the government with her password.

And all I'm going to mention from the search of her phone is that the evidence suggestions, first, that the defendant had contact using her cell phone with one of the parents in Minnesota in January of this year, but also that significant text messages appear to have been deleted from her phone.

I mentioned at the beginning of this factual proffer that the defendant had a phone call on January 21st with one of the parents and on January 23rd we could tell from the phone records that she exchanged six text messages with that number. Only one of those six text messages remains on the defendant's phone and that was a text message from the defendant to the Minnesota number stating, "February 3rd at 6:45 p.m.?" And the other five messages have been deleted.

On January 24th we know from the phone records that the defendant exchanged nine text messages with this phone number, but only two remain on her phone. Those two messages

were incoming to the defendant's phone and stated: "Provide me the address. We are planning to drive from here and we are coming together, we join the meeting that we scheduled, and go back together." And, your Honor, at this time that concludes my factual proffer. I can pause now and move into argument if you'd like. I would prefer that you move to THE COURT: argument. MS. WOODWARD: Certainly. Of course, the Court has four factors to consider under 18 U.S.C. Section 3142(q). The first factor is the nature and circumstances

The first factor is the nature and circumstances of the offense charged, including whether the offense is a crime of violence or involves a minor victim. Here the offense involves numerous minor victims. The nature and circumstances of this offense are that there is incredibly strong evidence that two very young victims were cut by this defendant very recently in February of 2017, but the evidence suggestions these were absolutely not the first of the defendant's victims and instead they were last in a long line of children cut by the defendant. The evidence suggestions the defendant has countless victims and that we could believe that the impact on these victims will be lifelong. It is hard to determine the complete number of victims due to the nature of this crime and

that it is incredibly secretive.

The nature and circumstances of the defendant's crime also include what this must be like for the victims in this community now who will face pressure from the community and from the defendant not to cooperate with law enforcement, and so the crime itself is, of course, heinous, but the pressure on the children in this community now to lie to help the defendant and their parents is enormous and simply something that children should not have to bear. And there is no question that the defendant knew that this was illegal, but she did it anyway.

So the nature and circumstances of the offense weigh heavily in favor of detention here.

Another factor for the Court to consider is the history and characteristics of the defendant. Here the defendant is a U.S. Citizen. She was born in Washington D. C. She is very well educated and has a medical degree and as a medical doctor there is no question that she is aware that FGM has no medical purpose.

Her history and characteristics also include significant resources, and those are outlined in the pretrial services report, and, therefore, that this defendant absolutely has the financial resources and incentive to flee, and, of course, she was arrested here while boarding an international flight. And the history and characteristics include her past

conduct, which includes the length of time that she has been performing this procedure on young girls.

Another factor for the Court to consider is the weight of the evidence against the person regarding dangerousness and risk of flight, and the weight of evidence, of danger, the defendant's dangerousness is strong because there is strong evidence of the crime and strong evidence that she was not deterred by her knowledge that this was in fact a federal crime. And the weight of the evidence of her flight risk is also strong because we know that she has significant resources, that she has a motive to flee, that she has international connections, and that she was, in fact, despite everything that had happened in her community and the chaos in her community on Monday, she was still attempting to leave the country.

And, lastly, but certainly not least, the Court must consider the nature and seriousness of the danger to any person or the community that would be posed by the person's release, and here this last factor also weighs in favor of detention. That is because the defendant knew before her arrest that this was an illegal procedure, but she proceeded to do it anyway and the only difference now is that she has been caught and that she faces time in prison. And the danger to the victims in the community and to the community overall includes also the danger that the defendant would continue to

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1
     attempt to obstruct justice, that she or others will place
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     pressure on victims in the community to recant their statements
     or to lie to the police or that she will pressure other
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 4
     witnesses in the community to lie.
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                  We know specifically that she directed the mother
 6
     in Minnesota to deny everything and we can assume that she has
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     said the same to other witnesses and would continue to say the
 8
     same.
 9
                  The defendant herself also lied to the authorities
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     when she denied having any knowledge about this procedure, and,
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     finally, she has deleted significant text messages from her
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     phone, and for those reasons, your Honor, the government asks
     that the Court find that there is no condition or combination
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14
     of conditions that can reasonably assure the safety of the
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     community or the defendant's appearance and find that she be
16
     detained pending trial.
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                  THE COURT:
                               Thank you, Ms. Woodward.
18
                  Counsel.
19
                 MS. SMITH: Thank you.
20
                  Your Honor, is the Court okay if I stand by the
     table, I have everything laid out.
21
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                  THE COURT: Certainly.
23
                  MS. SMITH: Okay. I just want to make sure you can
24
     hear me.
25
                               Certainly.
                  THE COURT:
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If I can't hear you, I'll let you know. 1 2 MS. SMITH: Okay. Thank you. Okay. Your Honor, the first problem in this case 3 is that the issue of FGM is one that presents many issues 4 5 related to vaqueness. There are four types of FGM that exist 6 according to the World Health Organization and all of the acts 7 that my client was performing on children did not meet the 8 criteria of those four definitions of potential FGM, and when 9 the prosecution started, Ms. Woodward explained to the Court that the FGM procedures include the removal of the clitoris or 10 11 the clitoral hood on young children. The evidence in this case 12 will not support that Dr. Nagarwala has ever removed the 13 clitoral hood or clitoris on any young female. 14 The media that has grabbed attention and has taken, has printed articles and posted articles about this case 15 16 have made the facts of this case appear to be far, far, far, 17 far more egregious than what was actually happening. 18 My client did meet with law enforcement. She did 19 deny having knowledge of FGM or that she had performed FGM and 20 she stands by those statements today. 21 The medical evidence that was determined from the 22 two young ladies from Minnesota who came and saw Dr. Nagarwala, 23 the medical findings do not support that they had their clitorises removed or clitoral hoods removed, and so there is a 24

lot of discrepancy between what was really taking place and

what some of these reports show.

There is also an abundance of vagueness in issues with respect to the terminology that is being used in this case.

In the Government's Exhibit 1 there's a letter dictating that genital mutilation is inappropriate, and my client agrees with that, and in portion two it states that it is possible that khafd, also recognized by some as khatna, or female circumcision is illegal and should not be prohibited.

It is my client's absolute position that she was not engaging in the words that are on this page in paragraph two. She is presumed innocent and there will be an issue whether what she was doing even meets the criteria of female genital mutilation.

That being said, we understand this is a very serious case. We understand that the circumstances surrounding this offense are serious, and my client does take this seriously. My client has been cooperative. She allowed me to turn over her cell phone through law enforcement through her husband. She allowed me to provide her password. She did meet with law enforcement and discuss this with them on Monday night last week.

My client denies that she has made efforts to encourage other people not to go to law enforcement. She believes that she has actually encouraged people to be only

honest about what was actually taking place.

In terms of my client, the weight of the evidence against her shows that this is going to end up being a very complicated complex case that's going to require a serious amount of litigation. That is all the more reason that Dr. Nagarwala should be allowed to be confined to her home, which would protect the community and keep her from fleeing.

My client has been in this country her entire life. She was born in Washington, D.C. She attended school at Johns Hopkins Medical School. She went to the University of Maryland. Her parents both live in this country. Her parents right now are in town in Michigan and she lives with her father-in-law, her husband, and she has four children.

Two of her children are in boarding school right now in Nairobi, where Dr. Nagarwala planned to go visit for the opening, a grand opening of a new campus over in Nairobi.

My client's passport was seized from her. It is in the possession of the government. We, obviously, have no objection to that. And any future travel plans would be canceled by my client. All of the travel plans that my client did have scheduled indicate she's always had the intention to return to the United States.

And very briefly I can just tell the Court she was scheduled on April 12th to leave the country to go visit her two daughters. I have brought as Exhibit A with me proof of

the round trip plan ticket showing that she would have been returning on 4-24 of '17.

As Exhibit B, which I will provide to the Court, I have a flight on April 27th my client had scheduled down to Florida because she was scheduled to give a presentation in Florida to other doctors about how to survive a midnight shift.

After her trip to Florida she was going to depart from Fort Lauderdale and be traveling to India for a family wedding, which is confirmed by Exhibit C, which I will provide the Court.

And while in India she was going to be attending a wedding, which will be confirmed by Defendant's Proposed Exhibit D. It's the invitation indicating that there were wedding festivities on the 5th and 6th of May.

However, my client did plan to return back to the United States and was scheduled to come back on May 15th, which is part of the itinerary as you will see.

After that she had a plan to go to Houston on May 19th, which is shown by Exhibit E. It's a round trip ticket to and from Houston because Dr. Nagarwala's oldest daughter just became engaged, and they were going to have some engagement parties.

The point is my client had every reason to return to the United States and to return to Michigan and to be here and all the intentions and plans that she made months before

she knew of this investigation would support the same. 1 2 There is also confirmation as Exhibit F that Dr. Nagarwala was going to attend and speak at this medical 3 conference in Florida. 4 5 And I'm providing the Court with Exhibit G, which 6 is a copy of the presentation that Dr. Nagarwala was going to 7 present. 8 I'm providing to the Court Exhibit H, which is 9 documentation from the school her two daughters attend showing that there were events that she was planning to attend, which, 10 11 again, she was going to return to the United States for. 12 And Exhibit I, which is her registration to 13 partake in those festivities. 14 At this time my client's ties to Michigan are far 15 more strong than any ties she has internationally. She has 16 resided in her Northville home for more than 12 years. Prior 17 to that she resided in a home in Troy for more than 12 years. 18 Her husband and herself own both of those homes free and clear. 19 They have substantial amounts of real estate in the area that 20 they rent out. 21 They have a business in Canton, Michigan that Dr. 22

Nagarwala partially works. Their family is in Michigan in terms of their father-in-law, her husband, and children who attend school in the Northville District.

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Dr. Nagarwala has no intention to leave the state

or the country and would absolutely stipulate to home confinement with a GPS tether so there is no question about where she is going.

She has the ability to post a secured or surety bond in this matter, and the family has -- I'm sorry. Dr.

Nagarwala has assets that will allow her to do this to reassure the Court that she will be back in court for every court date.

She has absolutely no criminal history and has never even had contact with law enforcement prior to these allegations at 44 years old.

Further, Dr. Nagarwala would stipulate to not have contact with anyone from the community, to not attend the mosque services that she normally attends, and to not have contact with any other witnesses in this case, aside from her husband or children, family members who live in the home. I would even make it clear that my office, myself, I would go to Dr. Nagarwala's house so that she would not even have to leave home confinement to come to my office for attorney appointments.

I am asking the Court to consider home confinement with a tether, a bond, I believe that would be the least restrictive way that would still allow Dr. Nagarwala to not be detained, but keep the community safe and keep any risk of flight.

By not having contact with others from the

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community she will have no ability to influence or do anything
that could cause any obstruction with this investigation or the
evidence that will be coming out.
            And, your Honor, unless the Court has further
questions, may I approach with my exhibits?
            THE COURT:
                         You may, but I do have a couple
questions.
            MS. SMITH: Sure.
            And I did show these to counsel prior to coming on
the record.
            THE COURT:
                         That wasn't one of my questions.
            MS. SMITH: Okay.
            THE COURT:
                         It seems, Ms. Thompson, that you are
admitting that this defendant did see young girls in a clinic
owned by some other individual after the clinic was closed on
Fridays, at least February 3rd is a Friday, and that this did,
these meetings did happen in a clinic where she performed some
sort of procedure.
            MS. SMITH: That is correct.
            THE COURT: You have told us what she has not
performed. What is it that she did perform and what was she
doing with these young girls?
            MS. SMITH: Your Honor, what was being performed
was a religious procedure where my client would look at -- on
the clitoris of the girls, there's a mucus membrane. She would
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wipe a little portion of the mucus membrane off, put it on a piece of gauze, which the family would then take the gauze with the mucus membrane and they would bury it. That was part of the religion and the customs in what this culture does.

THE COURT: Would you define the culture for me?

Everybody has talked about this community and this culture,

will you tell me specifically what we're talking about?

MS. SMITH: Sure.

This is -- the religion -- this is a Muslim religion and the sect from the church is the, I don't want to say it wrong, Dawoodi Bohra, which are, they're a small sect of -- well, they're known to be a nonviolent community that has congregations locally in Michigan and also all throughout this country.

So, my client belonged to a mosque where they attend services and had meetings and things along those lines. One of the major issues in this case is that within that community there has been a split and there has been one group of people following one leader, and one group of people following another. This is a highly political controversy within their community and what has happened as a result is that some of the people on one side have begun lodging false allegations on the other and vice versa. We believe that some of the reason this issue is coming before the Court is due to this essentially political divide in the community of people

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who have split off from the main community. That is one major
piece of information that we will have to conduct investigation
on to understand.
            THE COURT: So, you're telling the Court that
your client performed a surgical procedure --
            MS. SMITH: It was not a surgical procedure.
            THE COURT: Let me finish.
            She used instruments to remove tissue from the
clitorises of young girls and the tissue removed you're saying
was a mucus membrane.
            MS. SMITH: I am not saying she removed any tissue,
and I am not saying that she used instruments to remove the
         I am saying there's mucus on top of the parts, on top
of the female anatomy and that the mucus would be essentially
wiped away.
            THE COURT: Mucus would fit the definition of
tissue, no?
            MS. SMITH: I don't believe --
            THE COURT: You're saying she removed fluid?
            MS. SMITH: Fluid like a --
            THE COURT: And buried fluid?
            MS. SMITH: Yes.
            THE COURT:
                         That's what you're telling this
court?
            MS. SMITH: Yes.
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                  THE COURT: And she did this surreptitiously in a
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     clinic, not elsewhere, but in a clinic, a closed clinic, right?
                 MS. SMITH: Yes.
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                  THE COURT: And made no records of this?
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 5
                 MS. SMITH: That's correct.
 6
                  THE COURT:
                               Why in a clinic?
 7
                 MS. SMITH: It was not done as a medical procedure.
                               Why in a clinic.
 8
                 THE COURT:
 9
                 MS. SMITH: Just to have sanitation so there could
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     be no risk of infection, or anything, by exposing private parts
11
     to anything dirty or that could contaminate that area.
12
                  THE COURT: Clinics aren't necessarily sterile.
                 Why a clinic?
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                 MS. SMITH: That's where, that's just the best
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15
     place that they had to do these procedures.
16
                 And, like I said, my client would have no contact
     with the clinic or be in the clinic, obviously, if she was
17
18
     confined to house arrest.
19
                  THE COURT: So you're saying only fluid was removed
20
     from the end of the clitoris, the tip of the clitoris, that
21
     fluid was buried, right?
22
                 MS. SMITH: And, your Honor, the reason it was done
23
     this way was to avoid getting into any acts that could be
24
     considered FGM, which would involve cutting or excising
25
     portions of the clitoris.
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1 THE COURT: Understood. 2 Now, let me continue. And you're saying, therefore, I assume, and correct me if I'm wrong, that the 3 findings of the examining physicians are in error. 4 5 MS. SMITH: No, I am not saying that. I am saying 6 that the findings of the examining physicians may have been 7 caused by other, by even a child's scratching her vaginal area, 8 that could cause what would appear on a forensic medical 9 evaluation, or it's also possible -- well, I suppose that's the answer. I don't -- the activity that I understand that my 10 11 client was conducting would not go with those medical findings. 12 And again those --13 THE COURT: So whatever happened to those girls 14 and whatever findings were made by the examining physician, had 15 no relationship to your client's activities with these 16 children, is that what you're saying? 17 MS. SMITH: That's absolutely correct. And at this 18 point my understanding on those medical findings, that they only went so far as to say it appeared there was an 19 20 abnormality. There are not details about what those medical 21 findings showed. We have not seen any of the evidence about 22 what exactly the abnormality included. 23 The vaginal areas of young girls can frequently 24 show abnormalities that are not caused by any type of procedure 25 and so this is also going to be a complex issue we need to look

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1
     forward to in litigation of this matter.
 2
                  THE COURT:
                               I would agree with you.
                 Okay. Is there anything further?
 3
 4
                 MS. SMITH: No, your Honor, unless the Court has
 5
     further questions.
 6
                  THE COURT:
                              I might, but I'll reserve them.
 7
                 Ms. Woodward, do you have anything to say in
 8
     response?
 9
                 MS. WOODWARD: Your Honor, I would just say that
10
     about her travel plans, as I said, we concede that she was, had
11
     plans to leave and return to the country, and at the time she
12
     booked her flights I'm sure it was her intent to return, but
13
     now that all of this has happened and that she is facing very
14
     severe criminal charges, I don't think it's a big leap to infer
     that her plans to return could likely have changed.
15
16
                  Otherwise, I have nothing further.
17
                  THE COURT: Anything from the defendant?
18
                 MS. SMITH: No, your Honor.
19
                 THE DEFENDANT:
                                   No, your Honor.
20
                  THE COURT:
                               I still do not have a clear sense of
21
     what this community is and of whom it consists. Can you just
22
     elaborate for me a little bit more?
23
                 MS. SMITH: Sure.
24
                  This is a, there is a local mosque. They are, the
25
     Dawoodi Bohra community has --
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THE COURT: Could you spell that. That's not
 1
 2
     mentioned on Exhibit 1.
 3
                 MS. SMITH: It's on number three. D-A-W-O-O-D-I --
                 THE COURT: All right. I see it.
 4
 5
                 MS. SMITH: Bohra is B-H -- B-O-H-R-A.
 6
                 The Dawoodi Bohra are Muslims who have
 7
     congregations around the world.
 8
                 THE COURT: All right. Is this sect intrinsic to
 9
     any particular part of the world?
10
                 MS. SMITH: India.
11
                 THE COURT: This is an Indian sect.
12
                 MS. SMITH: Yes.
13
                 THE COURT: All right. Let's start with that.
14
     All right. Thank you.
15
                 MS. SMITH: And I apologize, your Honor, I'm
16
     learning a lot about the Dawoodi Bohra.
17
                 THE COURT: As are we all.
18
                 MS. SMITH: They have a local mosque and so there
19
     is a population --
20
                 THE COURT: Where is the mosque?
21
                 MS. SMITH: It's in Farmington Hills.
22
                 And so they have a local population of congregants
23
     who attend that mosque and go to functions and events there and
24
     pray there. My client is a member of that community and of
25
     that mosque.
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There are also other mosques in communities
throughout the country. There are some in Australia. There
are many in India. They are known throughout the world.
            THE COURT: All right. I have a guestion of Mr.
Mitchell if he would approach.
            MR. MITCHELL: Yes, your Honor.
       (Pause)
            THE COURT: I was given two copies of Exhibit 1.
I'm going to pass one back.
            Excuse me while I review Exhibit 1.
            Okay. Ms. Thompson, I am going to ask you one
more question, and it's, I've asked it, but I'm, I asked it
previously but I'm going to ask it in a different form.
            Your position is that your client did not in any
way directly or indirectly engage in what is described here as
khafd?
            MS. SMITH: Or khatna, which is in the next line.
            That's correct.
            THE COURT: And what you describe as what your
client actually did engage in with seven-year-old girls and
others over time, in a closed clinic, where no records were
being made, no charts and nothing was billed, you're saying
there was no payment for this?
            MS. SMITH: That's correct.
            THE COURT: Not cash or otherwise?
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1
                 MS. SMITH: That's correct.
 2
                               Is what? You're saying a removal of
                 THE COURT:
     mucus?
 3
                 MS. SMITH: A removal of mucus.
 4
 5
                 THE COURT: Let me stop you right now.
 6
                 When the mucus was removed, where was it placed?
 7
     Was it placed on a slide?
 8
                 MS. SMITH: The amount of mucus would look to be
 9
     about the amount of a sesame seed. It would be placed on a
     piece of gauze. The gauze would be just pinched together;
10
11
     given to the family to be buried. That's the religious
12
     procedure that was used.
                 So we're talking about a very small amount of
13
14
             It's not possible to hold mucus because it's not
15
     something tangible that you can pinch and hold. That's why
16
     they would put it on the gauze and give the gauze to the
17
     family. It was completely a religious practice.
18
                 THE COURT: All right.
19
                 And you're saying that if these girls when
20
     examined had, or had showed evidence that the labia minora or
21
     even the labia majora were indeed altered, that it was not by
22
     the hands of your client; it was by others?
23
                 MS. SMITH: Absolutely, yes.
24
                 THE COURT: And that's your defense?
                 MS. SMITH: Yes.
25
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THE COURT: And that's your position here? 1 2 MS. SMITH: Absolutely, yes. 3 THE COURT: And that when these girls were given a pad and were bleeding, it was because mucus was taken from 4 their clitoris. 5 6 MS. SMITH: My client denies that there was any 7 My client says that they use the beta iodine to clean 8 the area prior to doing anything, and they were given the pad 9 to protect their underwear from the brown beta iodine. not an issue with blood. 10 11 THE COURT: And when the victims say that they 12 were given a shot, why were they given a shot? MS. SMITH: My client tells me there was no shot 13 14 We believe that with these young seven year olds who 15 were interviewed, that it's very obvious to us that someone 16 talked to these seven year olds beforehand, made them believe 17 that what happened was far different than it was because 18 they've reported things that did not happen; such as, a shot in 19 the leg, and that some of that influenced the way they reported 20 these events when forensically interviewed. 21 And when the victims described a long THE COURT: 22 tool that was used to undertake this procedure, what is your 23 response to that? 24 MS. SMITH: We believe that any tool that they're 25 referring to is what would wipe the mucus that would end up on

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     the gauze.
 2
                 THE COURT: What tool was that?
                 MS. SMITH: It was a long, it looked like a
 3
 4
     scraper. I can't give a better -- it looked like a scraper,
 5
     but it was not used to cut or incise. It was used to take off
 6
     that little bit of mucus, a sesame size, put on the gauze,
 7
     gauze folded and given to the parents.
 8
                 THE COURT: And let me ask you one more question.
 9
                 MS. SMITH: Sure.
10
                 THE COURT: Your client is a physician?
11
                 MS. SMITH: Yes.
12
                 THE COURT: Does your client hold any religious
13
     position within the mosque?
14
                 MS. SMITH: My client does not hold any religious
15
     title if that's what you're asking.
16
                 THE COURT: I said, "position".
17
                 MS. SMITH: Or position, no.
18
                 THE COURT: So what entitles your client to be the
19
     go-to person for this procedure?
20
                 MS. SMITH: She's not necessarily the go-to person.
21
     She --
22
                 THE COURT:
                              Well, people went to her to have this
23
     done. Whether it's what you describe or what the government
24
     describes, people did come to her at this clinic, at this
25
     clinic, and appointments were made for these young girls to see
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1
     her in a closed clinic to have something done. Whether,
 2
     whether it is what you describe or otherwise, people came to
     her. Why? Why her?
 3
                 MS. SMITH: They came to her because she was
 4
 5
     familiar with the religious procedure that was done and she was
     willing to do it.
 6
 7
                 THE COURT: People came from Minnesota to
     Michigan to have her swipe mucus?
 8
 9
                 MS. SMITH: Yes, judge, and there was, it was our
10
     belief that there are other women in the community who also do
11
     this. My client wasn't the go-to exclusive person. We don't
12
     know -- and that's all yet to be investigated and discovered,
     but --
13
14
                 THE COURT: She was the person that these victims
15
     went to, that's all I mean to imply.
16
                 MS. SMITH: We absolutely agree that the two girls
     from Minnesota did come. They did see my client. They did do
17
18
     this religious procedure in the office.
19
                 THE COURT: Again, you call it a religious
20
     procedure. Your client is a physician. What is the
21
     connection?
22
                 She's not -- she does not have a position within
23
     this mosque. Most women don't.
24
                 MS. SMITH: Correct. Well --
25
                 THE COURT: She doesn't have a religious position
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1
     within the mosque. She is a physician. You're calling it a
 2
     religious procedure.
                 MS. SMITH: Right. It's not a medical --
 3
                 THE COURT: Tie it up for me.
 4
 5
                 MS. SMITH: It's not a medical procedure, but in
 6
     doing this --
 7
                 THE COURT: It's not a medical procedure, but it's
     done in a medical clinic. It's done by a physician, but it's
 8
 9
     not a medical procedure.
                 MS. SMITH: It does not have to be done by a
10
11
     physician.
12
                 THE COURT: But it was done by a physician in a
     medical clinic.
13
14
                 MS. SMITH: She happens to be a physician, yes,
15
     and it was done in a medical clinic. It was not medical
16
     treatment, which is why there are no records. There was no
17
     payment, no insurance, billing, nothing along those lines. I
18
     believe that my client and everyone involved just wanted it to
19
     be as sanitary as possible, as clean as possible, and by being
20
     in a medical facility they had access to sterilization to be
21
     able to make sure that nothing would ever contaminate these
     young ladies or contaminate any part of this procedure.
22
23
                 THE COURT:
                              Thank you.
                 Ms. Woodward, anything further?
24
25
                 MS. WOODWARD: No, your Honor. You've obviously
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noted that the description in the criminal complaint of the medical evidence in Minnesota is considerably different than what the defendant is describing here today, and so, obviously, we disagree strongly with her characterization of what she was doing.

THE COURT: All right.

With regard to the determination of bond or detention, as you know this court must review certain factors. Those factors were reviewed by the government in detail on the record. They are found in 18 U.S.C. 3142(g)(1) through (4).

And the Court must determine the nature and circumstances of the offense charged, including whether it is a crime of violence or whether it involves a minor victim.

With regard to the charges, and I'm only going to the charges, I'm not going to anything but the allegations.

Clearly these charges involve minor victims. So with regard to the first factor, those go in favor of the detention.

The weight of the evidence. It seems that Ms.

Thompson's characterization of what went on is her client's position, but we don't have any evidence with which to weigh the defense. We have no documents. We have no statements. We have nothing.

The government has witnesses. The government has statements. The government has examining physicians. So the weight of the evidence, again, goes against the defendant. So

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1
     on that factor detention seems to be, weighs in favor of
 2
     detention, I should say.
                  The history and characteristics of the person.
 3
     Clearly this defendant is a member of this community, as you
 4
 5
     said, born in this country, educated in this country,
 6
     practicing medicine in this country, working for a local
 7
     hospital system for many years as an emergency room physician.
 8
                  She does have strong community ties.
 9
                  She does not have a criminal record.
                  So, (3)(A) goes in favor of the defendant, and she
10
11
     clearly has no criminal record, so (A) and (B).
12
                 However, the nature and seriousness of the danger
13
     to any person or the community is troubling to this Court,
14
     because we have multiple victims who have travelled across
     state lines, some of whom. I don't know how many are local,
15
16
     but we talk about Michigan victims and we talk about other
17
     victims, and this gives the Court great pause.
18
                  The nuances -- let me go back to number 2(A)[sic].
19
     The person's character. I have issues with that more than I do
20
     her community ties and the issues I have with that go to the
21
     charges that this defendant may have lied to federal
     authorities, or did lie. The charges are that she has alleged
22
23
     to have lied to federal authorities, given false statements to
     a federal officer, and that's troubling to this court.
24
25
                  Whether or not it is true that she cautioned the
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families and their children to deny that this every took place,
is troubling. Now you're saying what took place was not
illegal, not even a medical procedure, so the Court is
wondering why your client would caution families and victims to
keep it quiet, not to mention it, not to talk about it.
            MS. SMITH: And, your Honor, on that my client
denies --
                         Denies having -- okay.
            THE COURT:
            MS. SMITH: Yeah. She denies that she did that.
            THE COURT: All right. Well, again, the weight
of that denial is weak. I mean, it's your client's position.
I don't have anything objective to use to weigh that.
            Pretrial services interviewed this defendant and
found, as we know, at least, that she poses a risk of flight
and is a danger, poses a risk of danger to the community based
on the nature of the charges, safety concerns, etcetera.
            I have to believe that your client is accurately
described in the pretrial services report with regard to the
findings made there, and also with the conclusions. I do agree
with pretrial services that there is a preponderance of the
evidence that does establish her as a risk of flight,
notwithstanding the fact that her passport has been seized.
appreciate that it has been.
            And I also think there's clear and convincing
evidence that your client poses a danger to the community.
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1
     With all due respect, I order detention.
 2
                  We're going to need a date for a preliminary exam.
 3
                  MS. SMITH: Thank you.
                               Preliminary examination?
 4
                  THE COURT:
 5
                  THE CASE MANAGER: April 27 at 1 p.m.
                  THE COURT: April 27 at 1 p.m.
 6
 7
                 MS. SMITH: Thank you.
                  THE COURT: You're welcome.
 8
 9
                 MS. WOODWARD: Thank you, your Honor.
10
                  THE COURT:
                              You're welcome.
11
             (At 2:40 p.m. proceedings concluded)
12
                           C E R T I F I C A T E
13
                I, Merilyn J. Jones, Official Court Reporter of the
14
     United States District Court, Eastern District of Michigan,
     appointed pursuant to the provisions of Title 28, United States
15
16
     Code, Section 753, do hereby certify that the foregoing pages
     1-39, inclusive, comprise a full, true and correct transcript
17
18
     taken in the matter of the United States of America versus
19
     Jumana Nagarwala, 17-mj-30182 on Monday, April 17, 2017.
20
21
                       /s/Merilyn J. Jones
                       Merilyn J. Jones, CSR 0935, RPR
22
                       Federal Official Reporter
                       231 W. Lafayette Boulevard, Suite 123
23
                       Detroit, Michigan
                                          48226
24
     Date: April 21, 2017
25
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